



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8403

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|
| SERIAL NUMBER 10/532,196 | FILING OR 371(c) DATE 04/21/2005 RULE | CLASS 514 | GROUP ART UNIT 1626 | ATTORNEY DOCKET NO. F-8647 |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|

APPLICANTS

Choon-Gon Jang, Gyeonggi-do, KOREA, REPUBLIC OF;
 Seok-Yong Lee, Yeungdungpo-gu Seoul, KOREA, REPUBLIC OF;

** CONTINUING DATA *****

This application is a 371 of PCT/KR03/02280 10/27/2003

** FOREIGN APPLICATIONS *****

REPUBLIC OF KOREA 10-2002-0066029 10/29/2002
 REPUBLIC OF KOREA 10-2003-0060353 08/29/2003

OK YC
 3-7-2007

| | | | | |
|--|---|------------------------|-----------------------|-----------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY KOREA, REPUBLIC OF | SHEETS DRAWING 4 | TOTAL CLAIMS 42 | INDEPENDENT CLAIMS 21 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | | | | |
| Verified and Acknowledged | Allowance <i>[Signature]</i> Examiner's Signature | Initials <i>YC</i> | | |

ADDRESS

28107

TITLE

Medicament component of berberine for the use of prevention and treatment of psychological dependence on and analgesic tolerance to morphine

| | | |
|------------------------------------|---|--|
| FILING FEE RECEIVED 1230 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |